## SOCIAL BEHAVIORAL SCALE FOR PERSONS WITH DEVELOPMENTAL DISABILITIES ALL INFORMATION SHOULD REFLECT WHAT HAS HAPPENED SINCE THE LAST CLINIC VISIT - OR LAST 2 MONTHS Person providing information Individual's name Circle if parent or other ( ) 1-3mo, ( ) 3-6mo, ( ) 6-9mo, ( ) 9-12mo, ( ) 1yr or more I have worked with this client: RATING SCALE Item/behavior has been Observed: 1 = Much less than usual 2 = less than usual 3 = about the usual 4 = more than usual 5 = Much more than usual**BEHAVIOR** - Data collection/behavior management program is designed to address: Target behavior #1: \_\_\_\_\_Target behavior #2: \_\_\_\_\_ I believe target behavior 1 is: 1 2 3 4 5 I believe target behavior 2 is: 1 2 3 4 5 VERBAL BEHAVIOR/COMMUNICATION: 5 Specific threats 1 2 3 4 5 6 Vague threats 1 2 3 4 5 7 Critical of self 1 2 3 4 5 8 Repeats over & over 1 2 3 4 5 1 2 3 4 5 9 Ref to hallucinations 1 2 3 4 5 1 Aggressive 10 Gibberish/no sense 1 2 3 4 5 1 2 3 4 5 2 Paranoid 3 Sexual 1 2 3 4 5 1 2 3 4 5 11 Appropriate 1 2 3 4 5 12 DOES NOT VERBALIZE 4 Sad Attempts at communication (verbal - signing - gesturing & no matter what the content) have ( )increased, ( )decreased, ( )stayed about the **EMOTIONAL/MOOD STATUS** General Mood has been: 1 2 3 4 5 7 anxious 1 2 3 4 5 5 10 calm 1 2 3 4 11 euphoric-elated 1 2 3 4 5 12 appropriate 1 2 3 4 5 13 other:\_\_\_\_\_1 2 3 4 5 1 2 3 4 5 14 other:\_\_\_\_\_ 1 2 3 4 5 15 other: 1 2 3 4 5 ENVIRONMENTAL CHANGES (New job, moves, new roommates, new staff, increase/decrease demands, new program, etc.) Comments/explanation: ENERGY LEVEL: AM 1 2 3 4 5 PM 1 2 3 4 5 ATTENTION SPAN: AM 1 2 3 4 5 PM 1 2 3 4 5 (staying on task) APPETITE: SLEEP: 1 2 3 4 5 Average hrs slept per night: **PSYCHIATRIC INDICES:** 1 hallucinations 1 2 3 4 5 2 talking to imaginary 1 2 3 4 5 3 paranoid 1 2 3 4 5 4 withdrawn 1 2 3 4 5 5 extreme mood shift 1 2 3 4 5 6 feeling out of control 1 2 3 4 5 11 euphoric-elated 1 2 3 4 5 12 appropriate 1 2 3 4 5 7 excessive staring 1 2 3 4 5 1 2 3 4 5 1 2 3 4 5 8 catatonia 13 other:\_\_\_\_ 14 other:\_\_\_\_\_1 2 3 4 5 9 stiff-odd posture/walk 1 2 3 4 5 15 other:\_ 1 2 10 unresponsive 1 2 3 4 5

**OTHER** comments/observations - what you believe is important, dramatic changes (in what), use other side if needed: